

Applicant: Adam L. Cohen

Docket No: P-US083-A-MF

Serial No: 10/697,598

Filing Date: October 29, 2003

Assignee: Microfabrica Inc.

Title: Medical Devices and EFAB Methods and Apparatus for Producing Them

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

March 8, 2004

POWER OF ATTORNEY

Dear Sir:

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint Dennis R. Smalley having USPTO Registration No. 35,364 as agent to prosecute the application identified above, and to transact all business concerning this application.

All communications concerning the above-noted application should be directed to Dennis R. Smalley, Microfabrica Inc., 1103 W. Isabel St., Burbank, CA 91506, USA.

Signature of Assignee Representative:

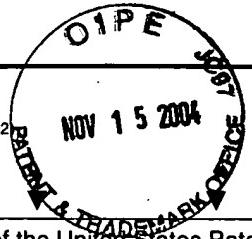
Microfabrica Inc.



Adam L. Cohen
Chairman & EVP Technology

3/12/04

Date



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To the Director of the United States Patent and Trademark Office: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):
Adam L. Cohen

2. Name and address of receiving party(ies):

Name: **Microfabrica Inc.**

Internal Address: _____

Additional names(s) of conveying party(ies)

 Yes No

3. Nature of conveyance:

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Street Address: **1103 W. Isabel St.**Execution Date: **March 12, 2004**City: **Burbank** State: **CA** ZIP: **91506**Additional name(s) & address(es) attached? Yes No

4. Application number(s) or patent numbers(s):

If this document is being filed together with a new application, the execution date of the application is: _____

A. Patent Application No.(s)

10/697,598

B. Patent No.(s)

Additional numbers attached? Yes No

5. Name and address of party to whom correspondence concerning document should be mailed:

6. Total number of applications and patents involved: **1**Name: **Microfabrica Inc.**Internal Address: **Att: Dennis R. Smalley**Street Address: **1103 W. Isabel Street**City: **Burbank** State: **CA** ZIP: **91506**7. Total fee (37 CFR 3.41): \$ **40.00**

- Enclosed - Any excess or insufficiency should be credited or debited to deposit account
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To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

Dennis R. Smalley

November 11, 2004

Name of Person Signing

Signature

2

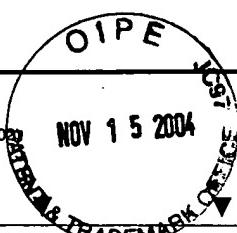
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Dennis R. Smalley

November 11, 2004

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ASSIGNMENT

For good and valuable consideration, receipt of which is hereby acknowledged, we

Adam L. Cohen	9537 Kirkside Road, Los Angeles, CA 90035
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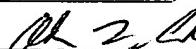
hereby sell, assign and transfer to Microfabrica Inc. having a place of business at 1103 W. Isabel Street, Burbank, California 91506, its successors, and assigns, the entire right, title, and interest throughout the world to the inventions that we have contributed to individually or jointly (whether or not claimed) as set forth in the following patents and/or patent applications

Country	Patent or Application No.	Issue Date or Filing Date	Title
US	App. No. 10/697,598	Filed on October 29, 2003	Medical Devices and EFAB Methods and Apparatus for Producing Them

and for all other patent applications and patents of every country for said inventions (whether or not yet filed), including divisions, reissues, continuations, and extensions thereof, and all rights of priority resulting from the filing of said applications; we authorize the above-named assignee to apply for other patents in the United States and/or foreign countries for said inventions, and to claim all rights of priority without further authorization from us; we agree to execute all papers useful in connection with these patent applications and/or patents, and generally to do everything possible to aid said assignee, their successors, assigns, and nominees, at their request and expense, in obtaining and enforcing patents for said inventions in all countries; and we request that the United States Patent and Trademark Office and all other patent granting authorities to issue all patents granted for said inventions to the above-named assignee, its successors, and assigns.

First assignor

Executed this 12th day of March, 2004.



(Signature)



Adam L. Cohen

Name (Typed or Printed)

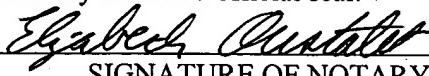
State of California)

ss.

County of Los Angeles)

On 3/12/04 before me, Elizabeth Oustale personally appeared Adam L. Cohen personally known to me or proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is(are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.



SIGNATURE OF NOTARY

